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ATTORNEY DOCKET NO: FITMO-002A

TITLE: FLEXIBLE NECK TOOTHBRUSH

SERIAL NO.: 10/721,635



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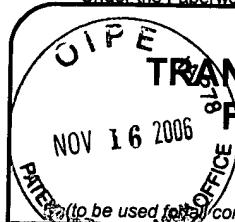
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TAMMY MOLL

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3. Amendment and Response to Office Action of October 19, 2006 (7 pages); and
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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/721,635
Filing Date	November 25, 2003
First Named Inventor	Edwards, Steven J.
Art Unit	3732
Examiner Name	Redding, David A.
Total Number of Pages in This Submission	9
Attorney Docket Number	FITMO-002A

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Certificate of Mailing; Return Receipt Postcard
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Stetina Brunda Garred & Brucker		
Signature			
Printed name	William J. Brucker		
Date	11/14/06	Reg. No.	35,462

CERTIFICATE OF TRANSMISSION/MAILING

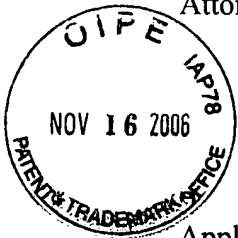
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Signature			
Typed or printed name	Tammy Moll	Date	11/14/06

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Application No.: 10/721,635
Response to Office Action of October 19, 2006
Attorney Docket: FITMO-002A



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants:	Edwards, Steven J.) Confirmation No.	7727
)	
Serial No.:	10/721,635) Art Unit:	3732
)	
Filed:	November 25, 2003) Examiner:	Redding, David A.
)	
For:	Flexible Neck Toothbrush)	
)	

AMENDMENT AND RESPONSE TO OFFICE ACTION

Mail Stop Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action of October 19, 2006, please amend the above-identified application as follows:

Amendment to the Claims begin on page 2 of this paper.

Remarks begin on page 6 of this paper.